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A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fec(s), or credit any overpayment, to Deposit Account Number 04-1105 (enclose an extra copy of this form). S. Change in Entity Status (from status indicated above) A Applicant claims SMALL ENTITY status. See 37 CFR 1.27. B Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Date March 22, 2006 42,693 Registration No. 42,693 Registration No. 42,693 Registration No. Authorized Signature Authorized Signature Steven M. Jensen Jens	Please check the appropri	ate assignee category or category	ories (will not be pri	nted on the p	patent) :	☐ Individual	Corporation or	other private gr	oup entity Government
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Typed or printed name Steven M. Jensen Registration No. 42,693	Authorized Signature	the day				Date Mare	ch 22. 3	2006	
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will year depending upon the individual case. Any complete application of time you require to complete		Staver M Jone	sen	Registration No. 42,693					
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this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 09/733,752-Conf. #4800 **Application Number** FEE TRANSMITTAL December 8, 2000 Filing Date For FY 2006 Gaines W. Hammond First Named Inventor **Examiner Name** B. E. Pellegrino 3738 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 62898(71589) TOTAL AMOUNT OF PAYMENT 1,700.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Money Order None Other (please identify): Check Credit Card Edwards Angeli Palmer & Dodge LLP x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply). Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES** SEARCH FEES **Small Entity** Small Entity Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) 200 100 Utility 300 150 500 250 200 100 100 50 130 65 Design Plant 200 100 300 150 160 80 500 250 600 300 300 150 Reissue Provisional 200 100 O 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Multiple Dependent Claims** Fee Paid (\$) **Total Claims** Extra Claims Fee Paid (\$) - 46 = Fee (\$) HP = highest numer of total claims paid for, if greater than 20. Extra Claims Indep. Claims Fee Paid (\$) _ × -3= HP = highest numer of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof Fee (\$) **Total Sheets** Extra Sheets (round up to a whole number) x - 100 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1501 Utility issue fee 1,400.00 1504 Publication fee for early, voluntary, or normal 300.00 SUBMITTED BY Registration No. 42,693 Telephone (617) 439-4444 Signature (Attorney/Agent) Date March 22, 2006 Name (Print/Type) Steven M. Jensen

Attorney Docket No.: 62898(71589)

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